



### 2018 Health Insurance Rates

Harvard Pilgrim Health Care Plan Choices	Total Monthly Premium	College Monthly Contribution	Employee Payroll Deductions	
			Weekly	Monthly
HMO – Individual	\$737.64	\$553.23	\$42.56	\$184.41
HMO – Family	\$1,999.01	\$1,499.26	\$115.33	\$499.75
PPO Plus – Individual – Non-Union	\$626.99	\$485.92	\$32.56	\$141.07
PPO Plus – Family – Non-Union	\$1,698.55	\$1,316.38	\$88.19	\$382.17
PPO Plus - Individual – Union	\$626.99	\$470.24	\$36.17	N/A
PPO Plus - Family – Union	\$1,698.55	\$1,273.91	\$97.99	
PPO – Individual (closed)	\$1,180.65	\$550.18	\$145.49	\$630.47
PPO - Family (closed)	\$3,199.57	\$1,491.00	\$394.29	\$1,708.57

### 2018 Dental Insurance Rates

Delta Dental Plan Choices	Total Monthly Premium	College Monthly Contribution	Employee Payroll Deductions	
			Weekly	Monthly
Premier PPO+ Individual	\$55.71	\$44.57	\$2.57	\$11.14
Premier PPO+ Family	\$145.39	\$72.70	\$16.78	\$72.70
Delta Care - Individual	\$37.65	\$30.12	\$1.74	\$7.53
Delta Care - Family	\$93.06	\$46.53	\$10.74	\$46.53

### 2018 Vision Insurance Rates

EyeMed Vision Plan Choices	Total Monthly Premium	Employee Payroll Deductions 100% Employee Paid	
		Weekly	Monthly
Employee Only	\$6.87	\$1.59	\$6.87
Employee + Spouse	\$13.05	\$3.01	\$13.05
Employee + Child(ren)	\$13.74	\$3.17	\$13.74
Family	\$20.20	\$4.66	\$20.20